

Agency Activity Inventory
by Agency
Appropriation Period: FY 2004-05

Agency: J12 - Department of Mental Health

Functional Group: Health

996 Traditional Community Mental Health Services

Services delivered from the 17 mental health centers that include: evaluation, assessment, and intake of consumers; short-term outpatient treatment; and continuing support services to maintain a client in the community (and out of a hospital). TLC (Toward Local Care) services and housing services are utilized throughout the community. TLC is a system-wide initiative which is designed to assist clients in transition from inpatient institutions into the community, help clients remain in the community and avoid rehospitalization, facilitate downsizing of the agency's long term psychiatric facilities, reduce acute care psychiatric admissions, and decrease cost of psychiatric care to agency. Mandated by Section 44-9-90 and 44-11-60. For emotionally disturbed children who qualify for the Interagency System for Caring for Emotionally Disturbed Children, Section 20-7-5710 mandates that DMH work together with other agencies in the system to "support children in a manner that enables them to function in a community setting".

FY 2004-05					
Total	General Funds	Federal Funds	FM	Other Funds	FTEs
\$150,280,865	\$61,585,526	\$7,350,100	Yes	\$81,345,239	3,079.13

Expected Results:

*Decrease hospitalization rate *Improve functioning of the consumer *Increase consumer satisfaction
 *Increase number of contacts with individuals with mental illness *Increase number of housing units available for psychiatric consumers

Outcome Measures:

The average cost per recipient in FY2004 is estimated at \$2,139 (includes all costs of community mental health). Industry-accepted quality benchmark: 16 of 17 centers are CARF-accredited for at least one program. In FY2003, there were 3,755 admissions to DMH inpatient facilities from the community mental health centers, down from 5,110 for FY2002. In FY2003, 62% of children showed improvement in functioning as measured by the CAFAS instrument, compared to 61% for FY2002. A November 2003 statewide sample of consumers showed that 87% reported positive scores for consumer satisfaction, 71% reported positive scores for outcome of treatment. The number of DMH contacts with DMH priority population (those that are severely emotionally disturbed) was 1,074,620 adult and 254,510 children in FY2004; 1,076,894 adults and 233,159 children in FY2003; and 1,049,218 adults and 214,401 children in FY2002. In FY2004, the Department funded the development of 216 new beds/units of housing for clients and 135 new beds/units for FY2003. In both years, for every \$1 the Department contributed, an additional \$5 was leveraged from other state and federal sources.

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997 School-Based Services

Services, such as counseling and case management, delivered to school children with mental illness by mental health professionals within the walls of the school system during the school day. For emotionally disturbed children who qualify for the Interagency System for Caring for Emotionally Disturbed Children, Section 20-7-5710 mandates that DMH work together with other agencies in the system to "support children in a manner that enables them to function in a community setting". Also, these are services which help DMH accomplish its duties as described in Section 44-9-90.

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FY 2004-05					
Total	General Funds	Federal Funds	FM	Other Funds	FTEs
\$12,855,556	\$2,468,731	\$1,729,385	Yes	\$8,657,440	251.94

Expected Results:

*Increase the availability of school-based mental health services to 484 programs statewide *Improve functioning of the consumer *Improve satisfaction of the consumer, family, and school system

Outcome Measures:

The average cost per recipient in FY2004 is estimated at \$816. Industry-accepted quality benchmark: 9 centers with a school-based services program (an outpatient treatment) are CARF-accredited for outpatient treatment. In 2002 services were available at 398 schools in FY2002, 426 in FY2003, and is now up to 472 in FY 04. In FY2004 65% of the youth who entered the program whose functioning was considered to be severely or moderately impaired showed improvement as assessed by the CAFAS. Also in 2004, 76% of the youth surveyed on the MHSIP survey reported positive scores for satisfaction with the services they received, and 81% felt they had benefited from the program. On the same instrument designed for families, 75% of the families surveyed reported positive scores for satisfaction and 69% felt their child had benefited from the program. 87% of school administrators surveyed in 2004 reported overall satisfaction with the services they received from the school based mental health program, and 94% reported that they noticed the children's behavior in school improved as a direct result of their participation in the program. The Department's focus has been to keep children in school, at home, and out of trouble.

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998 Employment Services

Services delivered by community mental centers that support consumers with serious and persistent mental illness in gaining and maintaining competitive employment. This includes Individual Placement Services (IPS) services, an evidence-based practice, at 6 community mental health centers.

FY 2004-05					
Total	General Funds	Federal Funds	FM	Other Funds	FTEs
\$1,349,376	\$721,912	\$51,019	Yes	\$576,445	28.00

Expected Results:

*Increase the number of DMH consumers with serious and persistent mental illness who are competitively employed

Outcome Measures:

In FY2004, the number of persons employed in the Individualized Placement Service program was 300; the number of persons employed in the work-in-progress program was 70. For FY2003, 15.9% of severely and persistently mentally ill consumers were employed. 161 consumers in the IPS program were reported to be competitively employed in the 4th quarter of 2003, up from 99 consumers in the 3rd quarter (see Making Recovery Real Progress Report).

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999 Crisis Stabilization

Evaluation and treatment services delivered by the community mental health centers that stabilize consumers in a crisis situation (who may be identified in the emergency rooms). These are services which help DMH accomplish its duties as described in Section 44-9-90. Preadmission screening and evaluation in psychiatric emergencies are mandated by Section 44-17-450.

FY 2004-05					
Total	General Funds	Federal Funds	FM	Other Funds	FTEs
\$14,731,941	\$8,941,383	\$463,033	Yes	\$5,327,525	308.63

Expected Results:

*Increase number of consumers in crisis diverted from admission to inpatient programs *Decrease number of consumers in crisis waiting in the emergency rooms or jails

Outcome Measures:

The average cost per recipient in FY2004 is estimated at \$1,188. Industry-accepted quality benchmark: 2 centers are CARF-accredited for crisis stabilization. For FY2003, 70% of participants in the Toward Local Care Crisis Diversion Programs were diverted from DMH hospitals, compared to 78% for FY2002. 37 individuals were waiting in the emergency room June, 2004, compared to 78 in July, 2003.

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Functional Group: Health

1000 Family Preservation

Intensive services delivered by the community mental health centers targeted to children who have been identified as being at high risk for out-of-home placement. The program works closely with the Department of Juvenile Justice (DJJ) and the Department of Social Services (DSS) to prevent removal of children from the home. This includes Multisystemic Therapy (MST), an evidence-based intensive family-and community based treatment that addresses the multiple determinants of serious antisocial behavior in juvenile offenders. MST targets chronic, violent, or substance abusing juvenile offenders at high risk of out-of-home placement and their families. For emotionally disturbed children who qualify for the Interagency System for Caring for Emotionally Disturbed Children, Section 20-7-5710 mandates that DMH work together with other agencies in the system to support children in a manner that enables them to function in a community setting. Also, these are services which help DMH accomplish its duties as described in Section 44-9-90.

FY 2004-05					
Total	General Funds	Federal Funds	FM	Other Funds	FTEs
\$3,162,289	\$1,242,534	\$691,273	Yes	\$1,228,482	63.00

Expected Results:

*Improve functioning of children at high risk for incarceration *Increase consumer satisfaction

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Outcome Measures:

The average cost per recipient in FY2004 is estimated at \$1,896. Industry-accepted quality benchmark: 2 centers are CARF-accredited for family preservation services. For FY2004, 42% of program participants showed a functional improvement (as measured by the CAFAS instrument), compared to 53% for FY2003. In conjunction with the Office of Research and Statistics at the Budget and Control Board, DMH will gather data on the number of children diverted from the Department of Juvenile Justice.

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1001 Deaf Services

Community mental health services for consumers who are diagnosed as both mentally ill and deaf, delivered by treatment staff who are able to overcome the potential communication barrier with sign language. DMH is mandated by Section 44-9-90 to have a statewide system to deliver mental health services. Services to individuals with limited English proficiency (LEP) is also mandatory under federal civil rights legislation.

FY 2004-05					
Total	General Funds	Federal Funds	FM	Other Funds	FTEs
\$528,430	\$426,514	\$92,416	No	\$9,500	11.00

Expected Results:

*Decrease hospitalization rate *Improve functioning of the consumer *Increase consumer satisfaction *Increase number of contacts with individuals with mental illness *Increase number of housing units available for psychiatric consumers

Outcome Measures:

The average cost per recipient in FY2004 is estimated at \$1,446. Industry-accepted quality benchmark: 16 of 17 centers were CARF-accredited for at least one program. In FY2003, there were 3,755 admissions to DMH inpatient facilities from the community mental health centers, down from 5,110 for FY2002. In FY2003, 62% of children showed improvement in functioning as measured by the CAFAS instrument, compared to 61% for FY2002. A November 2003 statewide sample of consumers showed that 87% reported positive scores for consumer satisfaction, 71% reported positive scores for outcome of treatment. The penetration rate, the number of DMH contacts with DMH priority population (those that are severely emotionally disturbed) was 1,076,894 adults and 233,159 children in FY2003, up from 1,049,218 adults and 214,401 children in FY2002. In FY2004, the Department funded the development of 216 new beds/units of housing for clients and 135 new beds/units for FY2003. In both years, for every \$1 the Department contributed, an additional \$5 was leveraged from other state and federal sources.

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1002 Long Term Inpatient Psych

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Services delivered in a hospital setting for adult consumers whose conditions are of such severity that they are not able to be treated in the community and are not expected to return to the community. Mandated by Section 44-11-10.

FY 2004-05					
Total	General Funds	Federal Funds	FM	Other Funds	FTEs
\$18,310,328	\$9,515,393	\$0	Yes	\$8,794,935	190.69

Expected Results:

*Increase the number of long-term psychiatrically disabled consumers who are moved out of long-term hospital care into community care

Outcome Measures:

The average cost per recipient in FY2004 is estimated at \$26,230. Industry-accepted quality benchmark: Bryan and Harris Hospital are JCAHO-accredited and CMS-certified. For FY2004, 300 long-term consumers were discharged from South Carolina State Hospital, Bryan Hospital, and Harris Hospital, compared to 315 for FY2003. The State Hospital was closed in April, 2004 to accomplish savings of \$5.3 million.

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Functional Group: Health

1003 Acute Psych

Services delivered in a hospital setting for adult consumers whose conditions are temporarily severe enough that they are not able to be treated in the community. Mandated by Section 44-11-10.

FY 2004-05					
Total	General Funds	Federal Funds	FM	Other Funds	FTEs
\$38,936,435	\$20,220,210	\$26,988	Yes	\$18,689,237	904.77

Expected Results:

*Decrease the number of consumers who stay in acute hospital care for longer than 90 days *Decrease the number of consumers who have to return to a hospital-setting for treatment *Improve functioning of the consumer *Increase the satisfaction of the consumer

Outcome Measures:

The average cost per recipient in FY2004 is estimated at \$15,846. In FY2004, 2,767 patients were discharged from acute care at Bryan and Harris Psychiatric hospitals in less than 90 days, compared to 3,088 in FY2003. For FY2003 readmissions within 30 days to the same facility: Bryan, 5.9% of admissions were readmissions; Harris, 5.5%. FY2004 average (preliminary data): Bryan 6.1%, Harris 5.1%. An average of 80% of Harris clients surveyed reported positive scores for outcome of treatment for the first four months of 2004. Industry-accepted quality benchmark - Bryan and Harris hospitals are both JCAHO-accredited and CMS-certified.

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1004 Inpatient Psych for Children

Services delivered in a hospital setting for those children whose conditions are of such severity that they can not be treated in the community; also treatment for children in the custody of the Department of Juvenile Justice who have a diagnosis of mental illness. Mandated by Section 44-11-10; in addition, family court-ordered evaluations of children is mandated by Section 44-24-150.

FY 2004-05					
Total	General Funds	Federal Funds	FM	Other Funds	FTEs
\$14,038,387	\$8,810,282	\$484,402	Yes	\$4,743,703	369.38

Expected Results:

*Improve functioning of the children to the point that they are able to return to community care as quickly as possible

Outcome Measures:

The average cost per recipient in FY2004 is estimated at \$33,979. Industry-accepted quality benchmark - Accredited by JCAHO and certified by CMS. For FY2004, the average length of stay in inpatient care was 52.1 days for children discharged to the community, compared to 53.6 days in FY2003. The mean percent change between the admission and discharge rating of overall functioning on the GAF (an instrument of consumer functioning), for the period 10/1/03 to 6/30/04, was 72.90%.

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Functional Group: Health

1005 Forensics

House the populations of individuals committed to the Department through the legal system (those that have been found Not Guilty by Reason of Insanity of a crime). Also carry out court-ordered evaluations of individuals accused of a crime for whom mental competence is an issue. Mandated by Sections 44-23-410 to -460 and Section 17-24-40.

FY 2004-05					
Total	General Funds	Federal Funds	FM	Other Funds	FTEs
\$15,201,231	\$4,328,229	\$0	Yes	\$10,873,002	13.10

Expected Results:

*Increase the number of individuals who are in care (for evaluations) for less than 90 days *Decrease the number of individuals on the wait list for court-ordered evaluations *Provide a secure treatment setting for committed individuals

Outcome Measures:

The average cost per recipient in FY2004 is estimated at \$35,331. For FY2004, 74% of individuals in forensic evaluations stayed for less than 90 days. The number of individuals on the list for evaluations was 7 in June of 2004, 9 in June of 2003, and 34.5 in June of 2002. The number of individuals found NGRI served in the secure forensics treatment setting was 107 for FY2003, compared to 146 in FY2002.

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Functional Group: Health

1006 Inpatient Alcohol & Drug

Treatment services delivered in an inpatient setting to individuals whose primary diagnosis is a substance abuse disorder. Mandated by Section 44-11-10.

FY 2004-05					
Total	General Funds	Federal Funds	FM	Other Funds	FTEs
\$10,322,823	\$5,469,030	\$0	No	\$4,853,793	240.97

Expected Results:

*Increase the number of consumers who do not relapse into substance abuse *Improve satisfaction of the consumer and family

Outcome Measures:

The average cost per recipient in FY2004 is estimated at \$5,183. Industry-accepted quality benchmark - Accredited by CARF. In CY2003 75% of the client's reported maintained abstinence, compared to 54% in CY2002. The number of days alcohol was used decreased 81% and the number of days clients used other drugs decreased 80%, compared to 89% and 81% respectively for CY2002. The number of days clients experience psychological problems decreased 63%, compared to 60% for CY2002. For CY2003, 92% of the clients were satisfied with services received at Morris Village (inpatient A&D facility), compared to 94% in CY2002.

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Functional Group: Health

1007 Nursing Home for Mentally Ill

Residential nursing care for individuals with mental illness. Mandated by Section 44-11-10.

FY 2004-05					
Total	General Funds	Federal Funds	FM	Other Funds	FTEs
\$27,467,249	\$13,033,541	\$3,191	Yes	\$14,430,517	527.20

Expected Results:

Provide a safe, comfortable environment for individuals with mental illness who need nursing care

Outcome Measures:

The average cost per recipient in FY2004 is estimated at \$60,665. Maintained accreditation, which speaks to safety and comfort of the residents (there are a number of other measures that together also address safety/comfort). The Joint Commission on Accreditation of Health Organizations accreditation score for 2003 was 91, compared to a score of 93 for 2000. Served 515 individuals for FY2003, down from 563 individuals for FY2002 (includes veterans from Stone Pavilion, which are not counted separately from the Tucker nursing

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center).

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1008 Veterans Nursing Homes

Originally residential nursing care for veterans who also have a mental illness; role has now expanded beyond that so that any veteran is eligible who meets the admission criteria. Authorized by 44-11-30.

FY 2004-05					
Total	General Funds	Federal Funds	FM	Other Funds	FTEs
\$16,011,892	\$5,737,343	\$0	Yes	\$10,274,549	163.05

Expected Results:

Provide a safe, comfortable environment for veterans who need nursing care

Outcome Measures:

The average cost per recipient in FY2004 is estimated at \$43,224. Maintained accreditation, which speaks to safety and comfort of the residents (there are a number of other measures that together also address safety/comfort). For 2004, the Veterans Administration accreditation survey found that at Stone Pavilion was only deficient in four standards, out of 175. For the other veterans home, Campbell, the Veterans Administration only rated two standards as "provisionally met", out of 158 standards in 2003, compared to five provisionally met in 2002. Campbell served 322 individuals for FY2003, up from 299 individuals in FY2002 (does not include veterans from Stone Pavilion, which are counted in with the Tucker nursing center numbers above).

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Functional Group: Health

1009 Sexually Violent Predator Program

Treatment for civilly-committed individuals found by the courts to be sexually violent predators. Mandated by the Sexually Violent Predator Act, Section 44-48-10 et al.

FY 2004-05					
Total	General Funds	Federal Funds	FM	Other Funds	FTEs
\$4,264,785	\$3,087,131	\$0	No	\$1,177,654	62.45

Expected Results:

Provide a secure treatment setting for committed individuals

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Outcome Measures:

The average cost per recipient in FY2004 is estimated at \$46,550. The number of individuals in the program 70 for June, 2004, compared to 68 in January, 2004. There have been 6 discharges from the program since January.

Agency: J12 - Department of Mental Health**Functional Group:** Health**1010 Administration**

Administration includes central office (the Commission and executive leadership) and the portions of the Division of Administrative Services that relate to human resources and financial services.

FY 2004-05					
Total	General Funds	Federal Funds	FM	Other Funds	FTEs
\$14,032,548	\$13,119,768	\$0	Yes	\$912,780	164.15

Expected Results:

Ensure that the provision of services is executed within the bounds of all applicable laws.

Outcome Measures:

A procurement audit for Jan. 2001 - Dec. 2003 has been recently completed with no significant exceptions reported. A substantial increase in the procurement authority has been recently granted for a number of procurement areas. The most recent audit examinations of financial and grant activities did not contain any significant audit exceptions. The department maintains its financial records in accordance with Generally Accepted Accounting Principles and in compliance federal grant requirements, state laws, and the State Appropriations Act, and it has operated within its budgetary constraints through several consecutive years of state budget cuts. Transactions for payroll processing, procurement, accounts payable, financial reporting and other financial transactions are executed in a timely manner and in accordance with applicable rules and regulations. The Department was the "pilot" agency for implementation of the SCEIS Financial Information System (SAP), which has been operational for over a year.

Agency: J12 - Department of Mental Health**Functional Group:** Health**1011 Pass Through Funds**

\$144,192 Gateway House \$50,000 Palmetto Pathways \$98,000 New Day Clubhouse \$250,000 SC Share \$50,000 Alliance for the Mentally Ill \$400,000 Continuum of Care (Proviso 10.3)

FY 2004-05					
Total	General Funds	Federal Funds	FM	Other Funds	FTEs
\$992,192	\$192,192	\$0	No	\$800,000	0.00

Expected Results:

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*Organizations will present itemized budgets and quarterly financial statements, as mandated by the proviso.

Outcome Measures:

No funds have been disbursed improperly.

AGENCY TOTALS

Department of Mental Health

TOTAL AGENCY FUNDS	TOTAL GENERAL FUNDS	TOTAL FEDERAL FUNDS	TOTAL OTHER FUNDS	TOTAL FTEs
\$342,486,327	\$158,899,719	\$10,891,807	\$172,694,801	6,377.46